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# County of San Diego

DEPARTMENT OF CHILD SUPPORT SERVICES

220 W. BROADWAY, 6TH FLOOR  
SAN DIEGO, CA 92101  
(619) 236-7600

Mailing Address:  
PO Box 122031, San Diego, CA 92112

Payment Address:  
STATE DISBURSEMENT UNIT  
PO BOX 989067  
WEST SACRAMENTO, CA 95798

PIN:  
DCSS #:  
NCP Name:

Dear \_\_\_\_\_ :

The attached form is to be used to request closure of your child support case if you are not currently receiving any form of public assistance for the child(ren) involved in the case listed above, or if you are receiving assistance but the other parent is currently living in your home and paternity has already been established. Please read each section carefully before completing the form.

Case closure does not affect the status of a court order. If a valid court order for child support exists, the support will continue to accrue even though the case is closed. If there is no reason for the non-custodial parent to continue to be responsible for paying ongoing support (the family has reconciled, there has been a change of custody, etc), it is your responsibility or that of the non-custodial parent to pursue modification or termination of the order through the court.

If the non-custodial parent owes support to the county for a period that your child(ren) received public assistance, the Department of Child Support Services (DCSS) will continue efforts to establish and/or enforce a court order to collect the support owed to the county after your portion of the case is closed.

You may request that we reopen your child support case at any time. As part of the case reopening process, you will be required to provide an affidavit detailing the history of payments during the period your case was closed.

If a valid court order for child support exists, as a part of the case closure process, DCSS can file a *Substitution of Payee* with Superior Court to make the court order payable directly to you. Filing this document would give you the option of obtaining your own wage assignment and enforcing the court order without the assistance of DCSS. This document can be filed in Superior Court with or without your address. If you want your address included, DCSS requires your written authorization because your address would become a permanent part of the Superior Court file and it would be available to the public. If you would like DCSS to include your address (or an alternate address where you can be reached) on the document, please provide your authorization under Section 2 on the attached form.

If you authorize your address to be included on the substitution document described above, then in addition to substituting you as the payee on the court order, DCSS can also substitute you as the payee on any *Abstract of Support Judgment* (ASJ) on file with the County Recorder. An ASJ is usually on file with the County Recorder for each court order that DCSS was enforcing on your behalf, in each county where the non-custodial parent was known to have worked and lived. An ASJ operates as a lien against any property that the non-custodial parent currently owns, or could potentially own in the future. This means that the non-custodial parent would be required to pay you any amount you demand, up to the full amount of support arrears and interest owed to you, before being allowed to complete a real estate transaction. This can only be done if you authorize your address (or an alternate address where you can be reached) to be included on the substitution form described in the paragraph above. This is because the escrow or title company needs an address to contact you if the non-custodial parent attempts to make a real estate transaction.

If you do not authorize your address to be included on the substitution document, the ASJs will not be made payable to you. Instead, DCSS will release all liens against the non-custodial parent as required by state law and you will not be notified if the non-custodial parent attempts to complete a real estate transaction. Please check the appropriate box under Section 2 on the attached form to indicate what you authorize DCSS to do with the court order and liens when the case is closed. If you fail to indicate your choice on the attached form, DCSS will assume that you do not authorize release of your address.

Please feel free to contact us at 619-236-7600 or toll free at 866-230-2273 if you have any questions regarding the case closure process.

Sincerely,

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DCSS Representative

PIN:  
DCSS #:  
NCP Name:

### **Section 1**

**If you would like to request closure of your child support case, please check one of the following boxes:**

- ☐ Please close my child support case. I am not currently receiving any form of public assistance.
- ☐ Please close my child support case. Paternity has already been established by court order and the non-custodial parent has lived in my home with the child(ren) since \_\_\_\_\_.
- ☐ Please close **my portion** of the child support case. I currently receive Medi-Cal benefits from the county but do not want child support issues pursued. I understand that the Department of Child Support Services will continue efforts to establish and enforce a court order for medical support for as long as I receive Medi-Cal benefits.
- ☐ Please close my child support case. I have not had physical custody of the child(ren) since \_\_\_\_\_. The child(ren) now live(s) with: \_\_\_\_\_  
\_\_\_\_\_  
whose last known address is \_\_\_\_\_  
\_\_\_\_\_
- ☐ Please close my child support case. The child was adopted and **I have enclosed a copy of the final adoption papers** or the other parent's parental rights were relinquished or terminated and **I have enclosed a copy of the final court order.**

### **Section 2**

**If your case contains a court order for child and/or spousal support, please also check one of the following boxes:**

- ☐ I do not intend to enforce the court order or lien(s) and therefore do not need DCSS to file a *Substitution of Payee* with Superior Court nor the County Recorder.
- ☐ Please file a *Substitution of Payee* with Superior Court but do not include my address on the document. I understand that since I do not authorize DCSS to include my address, they cannot file the document with the County Recorder to make the *Abstracts of Support Judgment* payable to me so all liens against the non-custodial parent will be released as required by law.
- ☐ Please file a *Substitution of Payee* with Superior Court. I authorize DCSS to include my address on the document. This is the address: \_\_\_\_\_. I understand that this address will become public record with Superior Court and the County Recorder in each county where an *Abstract of Support Judgment* is on file.

\_\_\_\_\_  
SIGNATURE REQUIRED

\_\_\_\_\_  
DATE